

EXHIBIT U

Umanzor / New York City Police Department

EEOC Charge

CHARGE OF DISCRIMINATION <small>This form is affected by the Privacy Act of 1974; See Privacy Act Statement before completing this form.</small>		AGENCY <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	CHARGE NUMBER
REDACTED			
S.S. No. REDACTED			
NAME (Indicate Mr., Ms., Mrs.) Mr. Randy Umanzor		HOME TELEPHONE (Include Area Code) REDACTED	
STREET ADDRESS REDACTED		CITY, STATE AND ZIP CODE REDACTED	DATE OF BIRTH REDACTED
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)			
NAME New York City Police Department		NUMBER OF EMPLOYEES, MEMBERS More than 34,500	TELEPHONE (Include Area Code)
STREET ADDRESS 1 Centre Street		CITY, STATE AND ZIP CODE New York, NY 10007	COUNTY New York
CAUSE OF DISCRIMINATION BASED ON (Check appropriate boxes)			DATE DISCRIMINATION TOOK PLACE EARLIEST (ADEA/EPA) LATEST (ALL) On or about May 20, 2014
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> AGE <input type="checkbox"/> RETALIATION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER			
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet)			
<p>On or about May 20, 2014, I was disqualified for a cadet position with the New York City Police Department ("NYPD") due to having been diagnosed with Multiple Sclerosis ("MS"). In and around 2013, I was diagnosed with MS but I have fully qualified for the cadet position. I feel fine, do not have any symptoms of the disease, and have not limitations or handicaps. I am a full time college student at the John Jay School of Criminal Justice with a good grade point average and my overall health is excellent. I am able to complete any duties that I would need to complete as a cadet and/or police officer. My neurologist found me fit to enter the NYPD. It has been my dream to join the NYPD since I was very young, and I am very upset to have my dreams crushed. I would understand this decision if my condition did not permit me to complete my duties, but I am able to complete anything a person without an MS diagnosis could do.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - (When necessary for State and Local Requirements)	
I declare under penalty of perjury that the foregoing is true and correct.		SIGNATURE OF COMPLAINANT	

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<p>Date _____</p> <p>Charging Party (Signature) _____</p>	<p>SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE</p> <p>(Day, month, and year)</p>
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EEOC FORM 5 (Test 10/94)